



NEW OR ADDITIONAL EQUIPMENT APPLICATION

Applicant's Completeness Checklist and Table of Contents

Project Name: _____ Project No.: _____

Project Description: _____

Done Page N/A Description of CON Rulebook Contents

Divider I. Application Summary:

- ☐ _____ ☐ 1. Applicant Identification and Certification (Form MO 580-1861).
- ☐ _____ ☐ 2. Representative Registration (Form MO 580-1869).
- ☐ _____ ☐ 3. Proposed Project Budget (Form MO 580-1863) and detail sheet.

Divider II. Proposal Description:

- ☐ _____ ☐ 1. Provide a complete detailed project description and include equipment bid quotes.
- ☐ _____ ☐ 2. Provide a legible city or county map showing the exact location of the project.
- ☐ _____ ☐ 3. Define the community to be served.
- ☐ _____ ☐ 4. Provide 2010 population projections for the proposed geographic service area.
- ☐ _____ ☐ 5. Provide other statistics to document the size and validity of any user-defined geographic service area.
- ☐ _____ ☐ 6. Identify specific community problems or unmet needs the proposal would address.
- ☐ _____ ☐ 7. Provide historical utilization for each of the past three years and utilization projections through the first three years of operation of the new equipment.
- ☐ _____ ☐ 8. Provide the methods and assumptions used to project utilization.
- ☐ _____ ☐ 9. Document that consumer needs and preferences have been included in planning this project and describe how consumers had an opportunity to provide input.
- ☐ _____ ☐ 10. Provide copies of any petitions, letters of support or opposition received.

Divider III. Community Need Criteria and Standards:

- ☐ _____ ☐ 1. For new units address the need formula for the proposed geographic service area.
- ☐ _____ ☐ 2. For new units, address the minimum annual utilization standard for the proposed geographic service area.
- ☐ _____ ☐ 3. For any new unit where specific need and utilization standards are not listed, provide the methodology for determining need.
- ☐ _____ ☐ 4. For additional units, document compliance with the optimal utilization standard, and if not achieved, provide documentation to justify the additional unit.
- ☐ _____ ☐ 5. For evolving technology address the following:
 - ☐ _____ ☐ – Medical effects as described and documented in published scientific literature;
 - ☐ _____ ☐ – The degree to which the objectives of the technology have been met in practice;
 - ☐ _____ ☐ – Any side effects, contraindications or environmental exposures;
 - ☐ _____ ☐ – The relationships, if any, to existing preventive, diagnostic, therapeutic or management technologies and the effects on the existing technologies;
 - ☐ _____ ☐ – Food and Drug Administration approval;
 - ☐ _____ ☐ – The need methodology used by this proposal in order to assess efficacy and cost impact of the proposal; and
 - ☐ _____ ☐ – The degree of partnership, if any, with other institutions for joint use and financing.

Divider IV. Financial Feasibility Review Criteria & Standards:

- ☐ _____ ☐ 1. Document that sufficient financing is available by providing a letter from a financial institution or an auditor's statement indicating that sufficient funds are available.
- ☐ _____ ☐ 2. Provide Service-Specific Revenues and Expenses (Form MO 580-1865) projected through three (3) years beyond project completion.
- ☐ _____ ☐ 3. Provide Detailed Institutional Cash Flows (Form MO 580-1866) projected through three (3) years beyond project completion.
- ☐ _____ ☐ 4. Document how patient charges were derived.
- ☐ _____ ☐ 5. Document responsiveness to the needs of the medically indigent.